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GREER, BUR 300 S WACKER 25TH FLOOR	NS & CRAIN R DR	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
CHICAGO, IL 6	00006						(Depositor's name)
							(Signature)
			L				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCK	KET NO.	CONFIRMATION NO.
10/589,939 TITLE OF INVENTION	06/28/2007 : PISTOL WITH SEMI-	RIGID LOCKING	Wilhelm Bubits		4331.7574	8	2365
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FI	EE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1	810	05/17/2010
EXAM	INER	ART UNIT	CLASS-SUBCLASS	7			
DAVID, MICHAEL D		3641	089-196000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unl recordation as set forth (A) NAME OF ASSIC	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE onal LLC	A TO BE PRINTED ON ' ified below, no assignee bletion of this form is NO categories (will not be pr	data will appear on the T a substitute for filing: (B) RESIDENCE: (CI' Abu Dhabi, Unit	patent. If an assign in assignment. TY and STATE OR C ed Arab Emirat	country) es		up entity
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			tb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-2069 (enclose an extra copy of this form).				
	s SMALL ENTITY statu	is. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
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Authorized Signature	Jawrence J. Cra	uy/ho	ein_	Date	15/201		
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